



# Urology Consultants, Ltd.

Center for Continence Care and Pelvic Medicine

## **BOTOX FOR OVERACTIVE BLADDER**

### **What is it?**

Botox® was approved by the FDA in the 1980's to treat certain disorders of the eye muscles and is now used widely in cosmetic procedures to treat wrinkles. It has been used in Urology since the late 1990's to treat disorders of the bladder or urethra. It acts by blocking the release of specialized chemicals from nerves; known as neurotransmitters, which cause muscles to contract. The effect is to temporarily paralyze or weaken the muscles that it is injected into.

### **How is it done?**

Botox® is injected into your bladder muscle using a specialized instrument called a cystoscope that allows us to look at the inner lining of the bladder. The procedure takes about 15 minutes or less and can be done in the office under local anesthesia, or in the operating room using sedation or general anesthesia. The procedure is done on an outpatient basis.

### **What are the benefits?**

Botox® can be used to treat incontinence or urgency/frequency caused by involuntary contractions of the bladder muscle. The benefits usually last for 6-9 months, and then the procedure may need to be repeated if successful. Studies have shown that 2/3 of patients benefit from this approach.

### **What are the risks?**

The risks of cystoscopy include a small risk of bleeding and infection, which are generally mild and treatable. The amount of Botox® needed to treat each individual varies. If too little is injected, the symptoms may only be partially treated, and a larger dose can be used at the next injection. If too much is injected, the bladder may not empty completely requiring you to use a catheter to empty your bladder. This may occur in 3-15% of patients.

### **What are the alternatives?**

Biofeedback (pelvic floor muscle therapy) and medications like Vesicare and Detrol are used to treat urgency/frequency and urge incontinence. These options will usually have been tried without sufficient benefit before Botox® is considered. Neuromodulation of the sacral nerves (InterStim®) is another option for urgency/frequency and urge incontinence. In many cases it also is considered before Botox®. Botox® is usually a more attractive alternative than permanent catheters, major bladder surgery, or just living with the problem when other options don't help.

### **Is it covered by me insurance?**

Since Botox® is not yet FDA approved for use in the bladder, your insurance may not cover the costs of the procedure. Medicare and Medicaid currently do not cover the use of Botox® for urologic reasons. For all other insurances, the office will do a prior authorization and if not covered by your insurance, you will need to sign a waiver stating that you are financially responsible for the service if you decide to go forward with the procedure.